PART B - FEE(S) TRANSMITTAL

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35195	7590 12/0 SSOCIATES LI REET	lock 1 for any change of address) 5/2007 _C	1	ree(s) Tran papers. Eac have its ow	ismittat. This certical additional paper in certificate of ma	the at Mulling or Trans	or domestic mailings of the for any other accompanying ent or formal drawing, must emission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.
			}				(Depositor's name)
			}				(Signature)
APPLICATIONING	FUNGALTE	 					(Date)
APPLICATION NO. 09/904,147	FILING DATE		FIRST NAMED INVENT	OR	ATTO	PRNEY DOCKET NO.	CONFIRMATION NO.
TITLE OF INVENTION:	07/11/2001 SYSTEMS AND MET	HODS FOR NATURAL	Shinsuke Mori SPOKEN LANGUAGI	E WORD F		9-2000-0133US1 ID \$PEECH RECOGN	2401 PITION
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	JE PREV.	PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300		80 02/07/2004 AL	\$1740	03/06/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS	7	902/07/2008 AWONDAF2 00000071 500510 03/06/2008 01 FC:1501 1440.00 DA 02 FC:1504 300.00 DA		00510 09904147
SMITS, TALIVALDIS IVARS		2626	704-251000				
1. Change of corresponden CFR 1.363). XXIXChange of correspon Address form PTO/SB/ XXIXFee Address" indic PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AN	(1) the names of up or agents OR, altern (2) the name of a sin registered attorney of 2 registered patent a listed, no name will THE PATENT (print or						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
International Business Machines Corporation Armonk, New York							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fcc(s) are XXIXssue Fee XXIIV ublication Fee (No Advance Order - # of	Payment of Fee(s): (P	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0510 (enclose an extra copy of this form).					
5. Change in Entity Status a. Applicant claims S	MALL ENTITY status	above) s. See 37 CFR 1.27.	□ b. Applicant is no le	onger claim	ning SMALL ENT	TTY status. See 37 CF	R 1 27(ν)(2)
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the finited States Patent and Trademark Office.							
Authorized Signature	Diky 1	m'1		Date		7, 2008	
Typed or printed name _				Reg	istration No 3.	3,879	
This collection of informati an application. Confidential submitting the completed a this form and/or suggestion Box 1450. Alexandria, Virginia 22313	on is required by 37 Clity is governed by 35 pplication form to the s for reducing this burginia 22313-1450. DO 1450.	FR 1.311. The information J.S.C. 122 and 37 CFR 1 USPTO. Time will vary den, should be sent to the NOT SEND FEES OR C	n is required to obtain o 14. This collection is a depending upon the ind Chief Information Offi OMPLETED FORMS	r retain a bestimated to dividual casicer, U.S. P TO THIS A	enefit by the public take 12 minutes of the Any comments attent and Tradem ADDRESS. SEND	ic which is to file (and to complete, including on the amount of tim ark Office, U.S. Depar of TO: Commissioner for	by the USPTO to process) gathering, preparing, and e you require to complete tment of Commerce, P.O. or Patents, P.O. Box 1450,

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